

# CLAIMS ONLY

SERIAL NO. \_\_\_\_\_

FILING DATE \_\_\_\_\_

APPLICANT(S)

## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2	1					
3	1					
4	1					
5	1					
6	1					
7	1					
8	1					
9	1					
10	1					
11	1					
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33	1					
34	1					
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36	1					
37	1					
38	1					
39	1					
40	1					
41	1					
42	1					
43	1					
44	1	2				
45	1					
46						
47						
48						
49						
50						
TOTAL IND.	9		↓			
TOTAL DEP.	38	2	↔	↔	↔	
TOTAL CLAIMS	45					

	*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
52						
53						
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97						
98						
99						
100						
TOTAL IND.			↓			
TOTAL DEP.			↔	↔	↔	
TOTAL CLAIMS						

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

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